

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001		2 PAGE # 1 of 20	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Amadeo	MI	OFFICE USE ONLY FILED IN MY OFFICE JACQUELYN F. CALLAHAN CLERK ELECTIONS ADMINISTRATION BEXAR COUNTY 2008 FEB 25 PM 4:01
	NICKNAME		LAST Ortiz	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #;		CITY;	STATE;	ZIP CODE
	1443 W. Elsmere San Antonio, TX 78201				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Robert	MI	Date Received
	NICKNAME Bob		LAST Lott	SUFFIX	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;		CITY;	STATE;	ZIP CODE
	5045 Ayrshire Dr San Antonio, TX 78217				
7 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER	EXTENSION	
(210) 414-9966					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month    Day    Year		THROUGH    Month    Day    Year		
01/25/2008    02/23/2008					
10 ELECTION	ELECTION DATE Month    Day    Year		ELECTION TYPE		
03/04/2008		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Bexar County Sheriff		
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...				
	Name				
	Address/PO Box; Apt. / Suite #; City; State; Zip Code				
GO TO PAGE 2					

# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

**14 C/OH NAME** Ortiz, Amadeo (Mr.)

**15 ACCOUNT #** (Ethics Commission filers)  
00000001

**16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

**COMMITTEE TYPE**

**COMMITTEE NAME**

☐ **GENERAL**

**COMMITTEE ADDRESS**

☐ **SPECIFIC**

**COMMITTEE CAMPAIGN TREASURER NAME**

☐ additional pages

**COMMITTEE CAMPAIGN TREASURER ADDRESS**

**17 CONTRIBUTION  
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 10,908.75

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 11,631.92

**CONTRIBUTION  
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

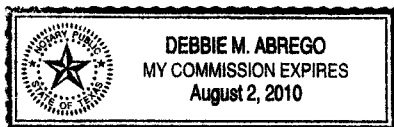
\$ 12,370.22

**OUTSTANDING  
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 3,000.00

**18 AFFIDAVIT**



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Amadeo Ortiz*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amadeo Ortiz, this the 25<sup>th</sup> day of February, 20 08, to certify which, witness my hand and seal of office.

*Debbie M. Abrego*  
Signature of officer administering oath

Debbie M. Abrego  
Print name of officer administering oath

Executive Assistant  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/6 Report: 3/20

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/18/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Acevedo, Rochelle

6 Contributor address; City; State; Zip Code  
1422 Buena Vista St.  
San Antonio, TX 78207

7 Amount of  
contribution (\$)

\$250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

01/25/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Apolinar, Roger

Contributor address; City; State; Zip Code  
21936 Park View Dr.  
Garden Ridge, TX 78266

Amount of  
contribution (\$)

\$450.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/22/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Arredondo, Donato

Contributor address; City; State; Zip Code  
7765 FM 482  
New Braunfels, TX 78132

Amount of  
contribution (\$)

\$1,000.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

01/31/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Campion, Charles

Contributor address; City; State; Zip Code  
222 Main Plaza East  
San Antonio, TX 78205

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/04/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Carnot, Alfred

Contributor address; City; State; Zip Code  
819 Midnight Drive  
San Antonio, TX 78258

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/6 Report: 4/20

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00000001

4 Date

02/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Delgado, Robert

6 Contributor address; City; State; Zip Code  
19830 Park Ranch Rd.  
San Antonio, TX 78259

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Deputy Sheriffs Association of Bex Co PAC

Contributor address; City; State; Zip Code  
816 Camaron #214  
San Antonio, TX 78212

Amount of  
contribution (\$)

\$1,615.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/15/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Esquivel, Irma

Contributor address; City; State; Zip Code  
218 Thompson Place  
San Antonio, TX 78225

Amount of  
contribution (\$)

\$90.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Garcia, Ruben

Contributor address; City; State; Zip Code  
P.O. Box 7423  
San Antonio, TX 78207

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/08/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gholson, William & Carolina

Contributor address; City; State; Zip Code  
8181 Tezel Rd  
San Antonio, TX 78250

Amount of  
contribution (\$)

\$800.00

In-kind contribution  
description (if applicable)

Billboard Rental - two  
months

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/6 Report: 5/20

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00000001

4 Date

02/01/2008

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Guerrero, Enrique

6 Contributor address; City; State; Zip Code  
4707 Trailwood Dr.  
San Antonio, TX 78228

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hernandez, Marie

Contributor address; City; State; Zip Code  
1214 General Brag  
San Antonio, TX 78245

Amount of  
contribution (\$)

\$900.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/10/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hernden, A. L.

Contributor address; City; State; Zip Code  
222 E. Main Plaza  
San Antonio, TX 78205

Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Leon, Jack

Contributor address; City; State; Zip Code  
500 Lexington  
San Antonio, TX 78215

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/18/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Longoria, Manuel

Contributor address; City; State; Zip Code  
31035 Retama Ridge  
Bulverde, TX 78163

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 6/20	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  02/07/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lott, Robert  6 Contributor address; City; State; Zip Code 5045 Ayrshire Dr San Antonio, TX 78217	7 Amount of contribution (\$)  \$680.65	8 In-kind contribution description (if applicable) P A System  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myers, David  Contributor address; City; State; Zip Code 186 Marlena San Antonio, TX 78213	Amount of contribution (\$)  \$545.00	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/04/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz, Albert  Contributor address; City; State; Zip Code 3926 Riverfalls San Antonio, TX 78259	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/03/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ortiz, Lorenzo  Contributor address; City; State; Zip Code 3 Greens Whisper San Antonio, TX 78216	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penshorn, Jerry  Contributor address; City; State; Zip Code 30473 Cloud View Dr. Bulverde, TX 78163	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 7/20	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  02/19/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perales, Jose  6 Contributor address; City; State; Zip Code 201 W. Poplar San Antonio, TX 78212	7 Amount of contribution (\$)  \$200.00	8 In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  02/14/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Joe  Contributor address; City; State; Zip Code 506 Rayburn Dr San Antonio, TX 78221	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rios, Ray  Contributor address; City; State; Zip Code 7423 Bronco Ln. San Antonio, TX 78227	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) San Antonio Produce Market  Contributor address; City; State; Zip Code 1500 S. Zazamora San Antonio, TX 78207	Amount of contribution (\$)  \$353.10	In-kind contribution description (if applicable) February Office Space Rent   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  02/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tafolla, Rolando  Contributor address; City; State; Zip Code 4226 Havenvue Ln. San Antonio, TX 78228	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/6 Report: 8/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/19/2008

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Vela, Dan

**6** Contributor address; City; State; Zip Code9251 Windward Trace  
San Antonio, TX 78254**7** Amount of  
contribution (\$)

\$100.00

**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

02/01/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Villalobos, Teresa

Contributor address; City; State; Zip Code

11314 Nonnday St.  
San Antonio, TX 78233Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02/19/2008

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Ybarbo, Raymond

Contributor address; City; State; Zip Code

123 Crane Circle  
Spring Branch, TX 78070Amount of  
contribution (\$)

\$500.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 1/12 Report: 9/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date

02/17/2008

**5** Payee name  
Applebee's**6** Payee address; City; State; Zip Code  
1511 SW Military Dr.  
San Antonio, TX 78221**7** Amount  
(\$)

\$31.54

**8** Purpose of payment (See instructions regarding type of information required.)

F &amp; B Meeting

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

01/25/2008

Payee name  
AT & T TelephonePayee address; City; State; Zip Code  
P.O. Box 930170  
Dallas, TX 75393-0170Amount  
(\$)

\$124.65

Purpose of payment (See instructions regarding type of information required.)

Office telephone &amp; Internet

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

02/03/2008

Payee name  
AT & T TelephonePayee address; City; State; Zip Code  
P.O. Box 930170  
Dallas, TX 75393-0170Amount  
(\$)

\$124.48

Purpose of payment (See instructions regarding type of information required.)

Office telephone &amp; Internet

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

02/18/2008

Payee name  
Beef & Bourbon Steak HousePayee address; City; State; Zip Code  
4946 Rigsby  
San Antonio, TX 78222Amount  
(\$)

\$20.70

Purpose of payment (See instructions regarding type of information required.)

F&amp;B Business meeting

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/12 Report: 10/20**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date

02/21/2008

**5** Payee name

Bexar County Democratic Party

**7** Amount  
(\$)

\$30.00

**6** Payee address; City; State; Zip Code3010 N. St Mary's St  
San Antonio, TX 78212**8** Purpose of payment (See instructions regarding type of information required.)

F &amp; B

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

02/02/2008

Payee name

Bill Miller Bar-B-Q #03

Amount  
(\$)

\$49.27

Payee address; City; State; Zip Code

1418 Pleasanton Rd.  
San Antonio, TX 78221

Purpose of payment (See instructions regarding type of information required.)

F &amp; B

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

01/25/2008

Payee name

Cheapestees.com

Amount  
(\$)

\$401.28

Payee address; City; State; Zip Code

1400 Rollins Road  
Burlingame, CA 74010

Purpose of payment (See instructions regarding type of information required.)

T-shirts for campaign

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date

02/11/2008

Payee name

Denny's Restaurant #6226

Amount  
(\$)

\$19.55

Payee address; City; State; Zip Code

7138 NW Loop 410  
San Antonio, TX 78238

Purpose of payment (See instructions regarding type of information required.)

F &amp; B Meeting

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 3/12 Report: 11/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

01/25/2008

**5** Payee name

Dr. Don's Buttons, Badges &amp; Magnets

**7** Amount  
(\$)

\$209.95

**6** Payee address; City; State; Zip Code3906 W. Morrow Dr.  
Glendale, AZ 85308**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/06/2008

Payee name

Dr. Don's Buttons, Badges &amp; Magnets

Amount  
(\$)

\$209.95

Payee address; City; State; Zip Code

3906 W. Morrow Dr.  
Glendale, AZ 85308

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/11/2008

Payee name

Duenas

Amount  
(\$)

\$100.00

Payee address; City; State; Zip Code

2023 Barney  
San Antonio, TX 78237

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing - Mail out

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/06/2008

Payee name

Easy Drive

Amount  
(\$)

\$652.50

Payee address; City; State; Zip Code

906 Ruiz St.  
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 4/12 Report: 12/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/06/2008

**5** Payee name

Easy Drive

**7**

Amount

(\$)

\$705.52

**6** Payee address; City; State; Zip Code906 Ruiz St.  
San Antonio, TX 78207**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/15/2008

Payee name

Flower's Foods

Amount

(\$)

\$22.58

Payee address; City; State; Zip Code

San Antonio Bakery  
San Antonio, TX 78260

Purpose of payment (See instructions regarding type of information required.)

Fundraiser F &amp; B

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/15/2008

Payee name

Gifts &amp; Things

Amount

(\$)

\$75.00

Payee address; City; State; Zip Code

1315 Merida St.  
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/14/2008

Payee name

HEB #36

Amount

(\$)

\$74.00

Payee address; City; State; Zip Code

7004 S. Zarzamora  
San Antonio, TX 78224

Purpose of payment (See instructions regarding type of information required.)

Automobile Expense

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 5/12 Report: 13/20**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date

02/01/2008

**5** Payee name  
HEB Grocery**6** Payee address; City; State; Zip Code2118 Fredericksburg Rd  
San Antonio, TX 78201**7** Amount  
(\$)

\$185.43

**8** Purpose of payment (See instructions regarding type of information required.)

F&amp;B Meet &amp; Greet

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

02/12/2008

Payee name  
HEB Grocery

Payee address; City; State; Zip Code

2118 Fredericksburg Rd  
San Antonio, TX 78201Amount  
(\$)

\$36.15

Purpose of payment (See instructions regarding type of information required.)

F&amp;B

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

02/14/2008

Payee name  
HEB Grocery

Payee address; City; State; Zip Code

2118 Fredericksburg Rd  
San Antonio, TX 78201Amount  
(\$)

\$16.08

Purpose of payment (See instructions regarding type of information required.)

F&amp;B

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

01/31/2008

Payee name  
Ideas Unlimited

Payee address; City; State; Zip Code

5213 Bandera Rd  
San Antonio, TX 78238Amount  
(\$)

\$624.00

Purpose of payment (See instructions regarding type of information required.)

Campaign T-Shirts

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/12 Report: 14/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/22/2008

**5** Payee name

Ideas Unlimited

**7**

Amount

(\$)

\$1,350.00

**6** Payee address; City; State; Zip Code5213 Bandera Rd  
San Antonio, TX 78238**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Signs

(If travel outside of Texas, complete Schedule T) ☐**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/22/2008

Payee name

Ideas Unlimited

Amount

(\$)

\$106.38

Payee address; City; State; Zip Code

5213 Bandera Rd  
San Antonio, TX 78238

Purpose of payment (See instructions regarding type of information required.)

Campaign Signs (Tax - invoice # 02496)

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/16/2008

Payee name

Jim's Cafe and Coffee Bar

Amount

(\$)

\$19.44

Payee address; City; State; Zip Code

842 NW Loop 410 Suite 107  
San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

F &amp; B Meeting

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

Date

02/15/2008

Payee name

Kiolbassa Provisional Co.

Amount

(\$)

\$153.00

Payee address; City; State; Zip Code

3125 South Brazos  
San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Fundraiser F &amp; B

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

<b>The INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1</b> PAGE # Schedule: 7/12 Report: 15/20
<b>2</b> FILER NAME Ortiz, Amadeo (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001
<b>4</b> Date  02/07/2008	<b>5</b> Payee name Kokpeli Internet Products  <b>6</b> Payee address; City; State; Zip Code 14455 N Hayden Rd Suite 219 Scottsdale, AZ 85260	<b>7</b> Amount (\$)  \$144.88
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Internet products  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  02/05/2008	Payee name Las Pinchanchas  Payee address; City; State; Zip Code 450 Fredericksburg Rd San Antonio, TX 78201	Amount (\$)  \$18.07
Purpose of payment (See instructions regarding type of information required.) F&B - Business Meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  02/01/2008	Payee name Lowe's Home Center  Payee address; City; State; Zip Code 203 Loop 410 SW San Antonio, TX 78245	Amount (\$)  \$48.07
Purpose of payment (See instructions regarding type of information required.) Supplies for campaign marketing  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  02/21/2008	Payee name LuLu's  Payee address; City; State; Zip Code 918 N. Main San Antonio, TX 78212	Amount (\$)  \$17.88
Purpose of payment (See instructions regarding type of information required.) F & B Meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 8/12 Report: 16/20**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  02/01/2008	<b>5</b> Payee name Network for Young Artists  <b>6</b> Payee address; City; State; Zip Code P.O. Box 831328 San Antonio, TX 78283	<b>7</b> Amount (\$)  \$300.00
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**8** Purpose of payment (See instructions regarding type of information required.)  
Entertainment & Sound Rental(If travel outside of Texas, complete Schedule T) ☐**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  02/16/2008	Payee name Northern Tool and Equipment  Payee address; City; State; Zip Code 2505 NW Loop 410 San Antonio, TX 78230	Amount (\$)  \$38.88
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Purpose of payment (See instructions regarding type of information required.)  
Supplies(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  01/31/2008	Payee name Office Depot  Payee address; City; State; Zip Code 5601 Bandera Rd San Antonio, TX 78238	Amount (\$)  \$147.34
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  02/05/2008	Payee name Office Max  Payee address; City; State; Zip Code 255 E. Basse Rd Ste 1510 San Antonio, TX 78209	Amount (\$)  \$22.90
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Purpose of payment (See instructions regarding type of information required.)  
Office supplies(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 9/12 Report: 17/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/11/2008

**5** Payee name

Office Max

**7**Amount  
(\$)

\$51.88

**6** Payee address; City; State; Zip Code255 E. Basse Rd Ste 1510  
San Antonio, TX 78209**8** Purpose of payment (See instructions regarding type of information required.)

Office supplies

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/11/2008

Payee name

PD Printing and Design

Amount  
(\$)

\$115.00

Payee address; City; State; Zip Code

4536 W. Commerce  
San Antonio, TX 78237

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/09/2008

Payee name

Piedras Negras Cafe

Amount  
(\$)

\$53.87

Payee address; City; State; Zip Code

1312 S. Laredo  
San Antonio, TX 78204

Purpose of payment (See instructions regarding type of information required.)

F&amp;B - Block Walkers

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/02/2008

Payee name

Rex Formal Wear

Amount  
(\$)

\$72.38

Payee address; City; State; Zip Code

7219 San Pedro  
San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Rental

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 10/12 Report: 18/20

**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00000001

**4** Date

02/15/2008

**5** Payee name

San Antonio Express News

**7**Amount  
(\$)

\$1,096.95

**6** Payee address; City; State; Zip CodeP.O. Box 2171  
San Antonio, TX 78297**8** Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

01/30/2008

Payee name

Screen Graphics

Amount  
(\$)

\$1,647.55

Payee address; City; State; Zip Code

1135 Basse Rd  
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Political Campaign Signs deposit

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/06/2008

Payee name

Screen Graphics

Amount  
(\$)

\$1,647.56

Payee address; City; State; Zip Code

1135 Basse Rd  
San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Political Campaign Signs

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

Date

02/20/2008

Payee name

Southside Reporter

Amount  
(\$)

\$249.00

Payee address; City; State; Zip Code

2203 S Hackberry  
San Antonio, TX 78210

Purpose of payment (See instructions regarding type of information required.)

Campaign Marketing

\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held:

(If travel outside of Texas, complete Schedule T) ☐

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 11/12 Report: 19/20
<b>2</b> FILER NAME Ortiz, Amadeo (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001

<b>4</b> Date  02/15/2008	<b>5</b> Payee name Toudouze Market  <b>6</b> Payee address; City; State; Zip Code 800 Buena Visa San Antonio, TX 78207	<b>7</b> Amount (\$)  \$75.75
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Supplies - for fundraiser 02-15-08  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

Date  02/15/2008	Payee name Toudouze Market  Payee address; City; State; Zip Code 800 Buena Visa San Antonio, TX 78207	Amount (\$)  \$23.77
Purpose of payment (See instructions regarding type of information required.) Supplies - for fundraiser 02-15-08  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

Date  02/09/2008	Payee name US Postal Service  Payee address; City; State; Zip Code Arsenal Station San Antonio, TX 78204-9998	Amount (\$)  \$410.00
Purpose of payment (See instructions regarding type of information required.) Postal Stamps  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

Date  01/25/2008	Payee name Wachovia Bank  Payee address; City; State; Zip Code 7750 I.H. 10 West Suite 1000 San Antonio, TX 78229	Amount (\$)  \$65.00
Purpose of payment (See instructions regarding type of information required.) Business Check Order  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 12/12 Report: 20/20**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001**4** Date

01/27/2008

**5** Payee name

West Avenue Panchitos Restaurant

**7**Amount  
(\$)

\$43.74

**6** Payee address; City; State; Zip Code12403 West Ave  
San Antonio, TX 78216**8** Purpose of payment (See instructions regarding type of information required.)

F &amp; B Meeting

(If travel outside of Texas, complete Schedule T) ☐**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Office sought:

Office held: